## **Indoor Booking Form**



## The Pavilion, Wainfleet Road, Skegness

0	on/individual:oh/individual:oh/individual:oh/individual:oh/individual:oh/individual		
Name and address of pe	rson responsible for paymen	t:	
Facility space required (p	lease tick)		
INDOOR	Club room	Function room	Other
Changing rooms require	ed? Yes No	Bar Required?	Yes No
DAY	DATE	START TIME	FINISH TIME COST
1	DAIL	START TIME	THISTITIME COST
2			
3			
5			
6			
7			
9			
10			
	must be paid for in advanc	e.	TOTAL
I acknowledge receipt of to be bound by them.	a copy of the Conditions Of	f Use governing the hiring	of the facility and agree
Please sign here:			
Signed:		Date	
Position with club:			
	n to: Operations Manager, The P Igmail.com Please note all bookir		
Form verified and authoris	ed by SSA Manager		SPORTS
Signed:			-OCIW.